

Report Title: Telehealth Application Details
Run Date and Time: 2020-06-19 17:18:56 Eastern Daylight Time
Run by: COVID Service Account
Table name: x_g_fmc_c19_telehe_grant_application

Telehealth Application

Number:	GRA0006983	
Applicant:	Eugene Sullivan	Applicant National Provider Identifier (NPI):
Applicant FCC Registration Number (FRN):	0012783718	Lead HCP: University of Virginia Health System
Data Universal Numbering System (DUNS) Number:	065391526	Lead HCP HCP Number: 50414
DATA Act Business Types:	A - State Government, H - Public/State Controlled Institution of Higher Education	# of HCPs: 1
Service Area:	Virginia	# of Funding Line Items: 1
		HCP Numbers: 50414, 25792, 10411, 53599, 28306, 53478

Contact Information

Contact Name:	Eugene Sullivan	
Position Title:	Director, Center for Telehealth, UVA Health System	
Street:	PO Box 800707	
City:	Charlottesville	
State:	VA	
Zip:	22907	
Email:	ksr5g@virginia.edu	
Phone:	434-924-2481	

Services and Conditions

Patient-Based Internet-Connected Remote Monitoring:	true	
Other Monitoring:	false	
Video Consults:	true	
Voice Consults:	false	
Imaging Diagnostics:	true	
Other Diagnostics:	true	
Remote Treatment:	true	

Additional information on Medical Services to be provided::

We offer a full range of clinical services to include consults and follow up visits across multiple specialties including infectious disease, pulmonary and critical care, and other services from 60 different healthcare specialties at UVA. We also have developed a video based isolation precautions model, first tested during the EBOLA outbreak and published in the peer reviewed literature. We will offer all these services to patients and providers in regional hospitals, skilled nursing, long term care facilities, federally qualified health centers and our own patients located at home. We also offer remote patient monitoring for COVID-19 positive patients, and other patients with chronic illness and pregnant women for whom we wish to improve outcomes and reduce exposure to COVID-19. We also offer eConsults to referring practitioners, as well as a video based case management program through Project ECHO. We are standing up a video based virtual urgent care program available to any citizen of the Commonwealth of Virginia connecting them through the UVA website to our Emergency Department physicians.

Would you treat patients without COVID-19 symptoms or conditions?:	Yes	
Would you treat COVID-19 patients directly?:	Yes	
Emergency / Urgent Care:	true	
Mental Health Services (Non-Emergency):	true	
Other Infectious Diseases:	true	
Routine, Non-Urgent Care:	true	
Other Conditions (Explain Below):	true	

If you will treat patients without COVID-19, explain...:

In particular, as one of two state designated special pathogen hospitals, in addition to serving patients within our region, we are also a primary referral site for patients with complex illness requiring critical care. By expanding our telemedicine program to support patients in community hospital, clinic and long-term care settings, we can free up resources within our own medical center for those patients needing hospitalization, mechanical ventilation, clinical trials for COVID19, and other services of a quaternary care hospital.

Additional information on specific conditions to be treated::

In addition to offering diagnosis and treatment services for COVID-19 positive patients, we offer a full range of specialty consults across the disciplines, including critical care support in community hospital settings with a goal of better managing patients in their own communities, and ensuring sufficient capacity for surge management for coronavirus positive patients at the UVA Medical Center. In addition, because we have a large network of Federally Qualified Health Center (FQHC) partners across rural and underserved regions of Virginia, to include clinics serving high risk patients with Black Lung disease, we propose to expand those services to prevent and/or treat those high risk patients.

Purpose and Intent

What are your goals and objectives for use of the COVID-19 Telehealth Funding?:

Our goal is to expand access to high quality care, better manage patients across the continuum, to include 1. prevention of exposure to COVID19, 2. manage patients identified as COVID19 positive in their home or LTC setting, 3. support LTC facilities and federally qualified health centers to better manage high risk vulnerable patients.

What is your timeline for deployment of the proposed service(s)?:

Since the declaration of the public health emergency, we have rapidly scaled our telemedicine program and propose to both expand partnerships and establish new partnerships to support vulnerable populations. We are building an urgent care platform with Vitelnet which we anticipate going live in May, 2020. In addition we propose to continue to expand our remote patient monitoring program as patients are diagnosed with coronavirus or are discharged from our Medical Center.

What metrics will you use to help measure the impact of the funds used? :

We have an existing telemedicine database (TRP) and a remote patient monitoring database that allows us to track a host of metrics including clinical metrics, and performance metrics. We propose to add a COVID19 module for tracking this additional population.

How has COVID-19 affected HCPs in your geographic area (e.g, county)?:

COVID19 has greatly affected healthcare in our region. We have reduced in person clinics and have created virtual care models to allow us to provide care to our existing patients to replace in person clinic visits during the pandemic. We have reconfigured 70 isolation rooms with videoconferencing endpoints in our hospital to support better management of COVID19 patients and reduce exposure, and wherever possible, decrease the necessity to utilize PPE. We have created COVID19 clinics to better screen and triage suspected patients. We have stood up rapid turn around laboratory testing for COVID19, making us a go-to resource for patients and other providers.

Have you been under pre-existing strains? If so, please describe such factors.:

As a state supported safety net hospital our mission always includes caring for patients regardless of financial considerations and insured status. Our primary service area is Central Virginia, but our secondary service area spans the entire Commonwealth of Virginia. Outside of the urban rings in Charlottesville, Albemarle and Culpeper, the region is primarily rural, with high rates of mortality and morbidity from heart disease, Type 2 diabetes, stroke, and lung disease. In these medically underserved regions, there are fewer physicians, nurses, clinics. The hospitals often lack fewer ICU beds. Contributing to poorer health outcomes are the population demographics -- rural residents are typically older, are economically at risk with higher poverty rates and lower rates of health insurance. Those who work in essential industries including agriculture and coal-mining are less able to self-isolate. Another vulnerable population in the service region are coal miners with lung disease -- there are currently more than 3000 persons with black lung disease in the region. UVA telemedicine is especially important to remote rural areas where there are shortages of primary health care providers and closures of rural hospitals, requiring patients to travel long distances to access health care. Other factors leading to health disparities include high rates of poverty, smoking, obesity and substance abuse, as well as low levels of educational attainment, especially in the Appalachian coal mining counties of Southwest Virginia. Overall, the rural population is at higher risk for mortality and morbidity from COVID-19. See attached Program Description for a more complete overview of the geographic region and populations to be served.

Do you plan to target the funding to high-risk and vulnerable patients?:

Yes

If so, please describe how.:

We have selected partners for inclusion in this proposal that serve low income patients (FQHCs), rural locations (two hospitals, including a critical access hospital), vulnerable patients in long term care and skilled nursing facilities, the 3,000+ coal miners in the Appalachian region of Southwest Virginia with black lung disease, our UVA emergency department, and a community facing portal for urgent care.

Please provide any additional information to support your application and :

Please see attached Program Description summarizing our approach to COVID-19.

Do you request confidential treatment of supporting documentation?:

No

Funding Request

Total Amount of Funding Requested:	996794	
Are you requesting funding for devices?:	Yes	
Are the devices for the health care provider's use?:	Yes	
Are the devices for patient use?:	Yes	

How are the devices integral to patient care?:

We are requesting support for clinical videoconferencing endpoints with remote patient examination tools, remote patient monitoring devices with biometric devices with data plan included.

Certification

Certified and Submitted by:	Eugene Sullivan	Certified Date and Time:	2020-05-22 17:43:40
Certifier Full Name:	Eugene Sullivan		

Related List Title: Health Care Provider List
Table name: x_g_fmc_c19_telehe_health_care_provider
Query Condition: Associated Application = GRA0006983
Sort Order: Number in ascending order

1 Health Care Providers

▲ Number	Facility Name	FRN	HCP Number	NPI	State	City	Eligibilit y Type	Total Patient Populati on	Estimate d Number of Patients to be Served by Funding Request	Associat ed Applicat ion	Addition al Informat ion on Patient Estimate :	County in which address is located	Is Lead HCP?	Is the Facility a Hospital ?	PDF Patient Estimate Info	Street Address
HCP000 9466	Universit y of Virginia Health System	0012783 718	50414		VA	Charlotte sville	(1) post- secondar y educatio nal institutio ns offering health care instructio n, teaching hospitals , and medical schools	365,886	25,000	GRA000 6983		Charlotte sville city, Virginia	Yes	Yes		Lee Street

Related List Title: Funding Request Details List
Table name: x_g_fmc_c19_telehe_funding_request
Query Condition: Associated Application = GRA0006983
Sort Order: Number in ascending order

1 Funding Request Details

▲ Number	Description of Service(s) and/or Device(s)	Category	Quantities(For Devices)	Total One-Time Expense	Total Monthly Expenses	Number of Months for Recurring Monthly Expenses	Date [Purchased or] To Be Purchased	Associated Application
FDR0012790	<p>DEVICES: Telemedicine carts, 18 @ \$7,035 ea. = \$126,630; iPads with cases, 6 @ \$389 ea. = \$2,334; COVID-19 Response Kits, 10 @ \$1,715 ea. = \$17,150; Locus Health Remote Patient Monitoring Systems with iPads configured with oximeter, thermometer and blood pressure cuff, 225 units @ \$1,260/unit = \$283,500; TytoCare Pro remote examination tools, 100 @ \$999/ea = \$99,900; VitalNet Video-based Urgent Care System with language translator, one at \$101,000; FirsNet enabled telehealth kits, 30 kits = \$39,330. TOTAL COST DEVICES: \$669,844 SERVICES: Totier Technologies, \$99,000 for technology deployment, testing costs and integration; Arista MD, \$179,950 for expansion of the eConsults platforms; Telehealth Management LLC, \$48,000 for adaptation of the UVA TRP platform for data collection and analysis for COVID-19. TOTAL</p>							GRA0006983

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	COST FOR SERVICES - \$326,950. SEE ATTACHED BUDGET REQUEST NARRATIVE FOR MORE DETAILS AND SUPPORTING DOCUMENTATION .							